## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

01142623

|  |  | PARTI<br>1)                               | \\R1F   <br>(Column 2)    |   |              | SMALL ENTITY TYPE |       |                     | OTHER THAN<br>OR SMALL ENTITY |       |                     |                        |
|--|--|---|---------------------------|---|--------------|-------------------|-------|---------------------|-------------------------------|-------|---------------------|------------------------|
| TOTAL CLAIMS   |  |   | 9                         |   |              |                   |       | RATE                | FEE                           | ]     | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED              |   | NUMBER EXTRA |                   |       | BASIC FEE           | 355.00                        | OB    | BASIC FEE           |                        |
| TOTAL CHARGEABLE CLAIMS  |  |   | 9 minus 20= *             |   |              |                   |       | X\$ 9=              | ·                             | OR    | X\$18=              |                        |
| INDEPENDENT CLAIMS   |  |   | minus 3 = *               |   |              |                   |       | X40=                |                               | OR    | X80=                | ·                      |
| ML   | ILTIPLE DEPEN  | IDENT CLAIM P                             | RESENT                    |   |              |                   |       | +135=               |                               | OR    | +270=               |                        |
| * If   | the difference   | in column 1 is                            | less than zero, enter "0" |   | 0" in co     | olumn 2           | •     | TOTAL               | •                             | OR    | TOTAL               |                        |
| Claims as amended - part II  |  |   |                           |   |              | 0.                | TOTAL | <u> </u>            | ] 011                         | OTHER | THAN                |                        |
| (Column 1) (Column 2) (Column 3  |  |   |                           |   |              | (Column 3)        | ,     | SMALL               | ENTITY                        | OR    | SWALL               |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                           | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO   | R            | PRESENT<br>EXTRA  |       | RATE                | ADDI-<br>TIONAL<br>FEE        |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total ===  | *   | Minus                     | **                                      |              | =                 |       | X\$ 9=              | 7.7                           | OR    | X\$18=              |                        |
|  | Independent  |   | Minus                     | ***                                     |              | =                 |       | X40=                |                               | OR    | X80=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                           |   |              |                   |       | +135=               |                               | 1     | +270=               |                        |
|  | and the state of t |   |                           |   |              |                   |       | TOTAL               |                               | OR    | TOTAL               |                        |
|  |  |   |                           |   |              |                   |       | ADDIT. FEE          | <u></u>                       | OR    | ADDIT. FEE          |                        |
|  | (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  |   |                           |   |              |                   | 7 1   |                     | 1001                          | ו ה   |                     |                        |
| AMENDMENT B  |  | REMAINING<br>AFTER                        |                           | NUMBE<br>PREVIOU                        | R            | PRESENT<br>EXTRA  |       | RATE                | ADDI-<br>TIONAL               |       | RATE                | ADDI-<br>TIONAL        |
|  |  | AMENDMENT                                 |                           | PAID FC                                 |              | EXTIN             |       |                     | FEE                           |       |                     | FEE                    |
|  | Total  | <b>*</b> **;                              | Minus                     | **                                      |              | =                 |       | X\$ 9=              |                               | OR    | X\$18=              |                        |
| S WE   | Independent  | * *                                       | Minus                     | ***                                     |              | =                 |       | X40=                | i i                           | OR    | X80=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                           |   |              |                   |       |                     |                               |       |                     |                        |
|  |  |   |                           |   |              |                   | +135= |                     | OR                            | +270= |                     |                        |
|  |  |   |                           |   |              |                   |       | TOTAL<br>ADDIT. FEE |                               | OR    | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                | - 1                       | (Column                                 |              | (Column 3)        | _     |                     |                               |       |                     |                        |
| AMENDWENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ٥                         | HIGHES<br>NUMBEI<br>PREVIOUS<br>PAID FO | R<br>SLY     | PRESENT<br>EXTRA  |       | RATE                | ADDI-<br>TIONAL<br>FEE        |       | RATE                | ADDI-<br>TIONAL<br>FEE |
| S S  | Total  | *   | Minus                     | **                                      |              | =                 |       | X\$ 9=              |                               | OR    | X\$18=              |                        |
| ME   | Independent  | *   | Minus                     | ***                                     |              | =                 |       | X40=                |                               |       | X80=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                           |   |              |                   | }     |                     |                               | OR    | ,,,,,               |                        |
| • 14   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |   |                           |   |              |                   |       |                     |                               | OR    | +270=               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE  |  |   |                           |   |              |                   |       |                     |                               |       |                     |                        |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                           |   |              |                   |       |                     |                               |       |                     |                        |